State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2012 Election Year

IF YOUR ANSWER TO ANY OF THE FOLLOWING QUESTIONS IS "YES," YOU CANNOT USE THIS FORM, YOU MUST USE THE LONG FORM (FORM F-7) TO FILE YOUR CAMPAIGN FINANCE REPORT.

- 1. Has your committee received any loans? NO
- 2. Has your committee held any fundraisers? 170
- 3. Has your committee received any miscellaneous receipts, such as refunds or checking account interest?
- 4. Does your committee have any unpaid bills? PO
- 5. Have you or anyone else given an in-kind contribution to your campaign? \mathcal{NO}
- 6. Has your committee given or received a transfer of excess campaign funds? 10

Candidate or Committee Name	Candidate or Committee's Treasurer	
Michael T. Ferro, Ferro 2 Political Party (for candidates) Democratic Office Sought (for candidates) District/Divis	Treasurer's Mailing Address (Street, 1309 Marshall S	Route or P.O. Box) Well Daytime Phone #
Office Sought (for candidates) District/Division House of Delegates, 4th	- McMedien, WV 2614	
Primary - First Report Due March 31-April 6,2012 General - First Report Due Sept. 24-28, 2012 Pre-primary Report Due April 23-27, 201 Pre-general Report Due Oct. 22-26, 201	Post-primary Report Due May 21-June 19, 2012 Due May 21-June 19, 2012	Check if Applicable: Amended Report You must also check box of appropriate reporting period Final Report
Non-Election Cycle Re-	Report Due In Calendar Year st Saturday in March or within 6 nereafter	Zero balance required. PAC must also file Form

REPORT TOTALS

(Fill in totals after you have completed page 2)

CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)	1.	\$17,590.77
Total Contributions (from Page 2)	2.	+ \$3,700.00
Subtotal (lines 1+2)	3.	=\$21, 290-77
Total Expenditures (from Page 2)	4.	-\$4,951-67
Ending Balance (lines 3-4)		=\$16,339,10
*Cannot have a ne	gativ	ve ending balance

TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE (Add line 2 from all reports)

\$33,862.65

TOTAL EXPENDITURES
ELECTION YEAR-TO-DATE
(Add line 4 from all reports)

\$17,523.55

CONTRIBUTORS OF:

More than \$250

\$250 or Less

or Less

V244 07						
Date Full Name	Amount	Date	Amount	1 5/1	1-1-11	
they we thysical Therapy	\$100.00	743/2	Full Name: Commeter Address: 122 Grapevi) Contributor's job: (Individual)	no d'idas 1	rive:	\$1000.00
Idu Christina Comeron	\$200.00	├ ──-	Contributor's job: (Individual Where contributor works: (In Affiliation: (Political committe		Odegudes	\
140 Friend of Be Trade PAC	\$250.00	PEN	المناكمة والمساكرين والمناسبات والمساكر	N -3- -	1 / 9 r x 2d	\$35000
1412 Herbert Tyner Revocable	\$250.00	ieps/s	Affiliation: (Political committee	ee) n/a	Form	
Hall Steve + Rhonda Sarres	\$250,00	444/16		ninglyn Str	est East	\$300.00
1811 Jeremy M-Jacobs	\$250.00		Contributor's job: (Individua Where contributor works: (In Affiliation: (Political committ	ee) XL ab	wed 25511	- 1
		VIJAL	Full Name: (h0Sapeake Address: p-0, Box 18	576. N.L	ma City,	- \$750-VV
			Contributor's job: (Individua Where contributor works: (I Affiliation: (Political commit	ndividual)	01C 73154 ab _y azer	
Check if additional pages have been atached.			Total Cont (add both	ributions: columns)	\$3,7	071.00
ITEMIZED EXPENDITE	 JRES (Iten	nize 3	rd pary expenditure	s/ reimburs	ements)	
Date Full name, residence address (if perso				Purpose		Amount
	chod, 32	<u>5</u> L	ogan Shrelt;	Adver	tising \$	525.00
Wheeling News Register, 1500 Main Greet; Advertising \$780.00						
Opple AAA. Signs, P.O.	Box 9	1006	, bunhaghon, W 25704.	Campuig	n signs \$	392,20
Wash Political Marketing I	18.11 698:11	mal Porio	Inc. P.O. Box Inna, FL 32446.	Advert		5/68,21
North Marshall- Wetzel	Tylest	abg	Moderilled 2506	Steated	y diket	520.00
MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED.			1	otal Expen	ditures:	
	OATH	OR A	FFIRMATION			
I,and correct, to the best of my knowledgestatement, as required by West Virginia	ge, of all fin a Code §3-	anciá 8-5a.	ewear or affirm the large of th	nat the attaing within the	ched stater period cov	ment is true ered by thi
			Signature	e of Candida	ate, Agent, o	or Treasure
Date, 20			, 	- 0// - 1:	- 0-1	
				Office Us	e Only	

Received By:_

CONTRIBUTORS OF:

\$250 or i ess

More than \$250

	\$250 or Less				LITATI \$250	
Date	Full Name	Amount	Date	Amount		
			Į	Full Name: Address:		
-+		 	1 _	Contributor's job: (Individua Where contributor works: (I Affiliation: (Political commit	individual)	
		1	1	Full Name: Address:		
-		+	1_	Contributor's job: (Individu Where contributor works: (Affiliation: (Political commi	moividual)	
				Full Name: Address:		
				Contributor's job: (Individu Where contributor works: (Affiliation: (Political commi	(Individual)	
				Full Name: Address:		
		+	1_	Contributor's job: (Individu Where contributor works: (Affiliation: (Political commi	al) (Individual) ittee)	
				Total Con	tributions:	
, A	Check if additional pages have been atached.			(add both	columns)	
	ITEMIZED EXPENDIT	URES (Iter	nize 3	3rd pary expenditure	es/ reimbursements	
Date	Full name, residence address (if perso	on); business ac			Purpose	Amount
Male	Miracle League Netw	Wholli	ArI	linghon Prive, NV 2603.	Dorahim	\$50.00
1841	M+M Mailing Co		Bo	× 6605;	Mail preparation	\$300.18
USAI	U.S. Postal Serv	il, P.C	$\frac{\partial}{\partial x} B_i$	X 59651; N 25 35 0.	Postage	\$1,883.2
	De Printing Press	Charlesh	P. D.	, Box 10186; NV 25337.	Printing.	\$ 959,30
11/1	Memberille Paily Ech	2 .	Bax	369;	Advertising	\$26.50
MAKE OF T	E AS MANY COPIES HIS PAGE AS YOU NEED.	Mana	เมาแน	Ing. Leading	Total Expenditures:	
	IIO PAGE AG TET	OATH	OR A	FFIRMATION	_	
l,	correct, to the best of my knowled	ice of all fit	nancia	, swear or affirm	that the attached staing within the period c	tement is tru overed by th
state	ement, as required by West Virgini	a Code §3	-8-5a.	,	-	
				Signatu	re of Candidate, Agen	ıt, or Treasur
Date	;				Office Use Only	
				Rece	eived By:	

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Amount	Date	Amount			
		Full Name: Address:			
	1	Contributor's job: (Individua Where contributor works: (Affiliation: (Political commi	al) Individual) ttee)		
	1	Full Name: Address:			
	1	Contributor's job: (Individu Where contributor works:	al) (Individual) ttee)		
-		Full Name:	· · · · · · · · · · · · · · · · · · ·		
		Full Name: Address:			
	1	Contributor's job: (Individu Where contributor works: Affiliation: (Political comm	al) (Individual) ittee)		
• • • • • • • • • • • • • • • • • • •		Total Con	tributions:		
		(add both	columns)		
TURES (Iten	nize 3	rd pary expenditure	es/ reimburs	ements)	
	_		Purpose		Amount
328	Logi	an street;	Spagnetts	dimer	\$50.00
Register	150	TO Main Street;	Advers	ising.	\$12,00
High Street		1, 325 Loyan Mocken iw 26040	Adven	tising	\$ 100.00
		, 	i		
		FIRMATION			\$ 4 ,951.67
	son); business ac 328 McA Register	son); business address (i 328 Loga McMeck Register, 150 Whee ling	Contributor's job: (Individue Where contributor works: Affiliation: (Political commit	Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee) Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Where contributor works: (Individual) Affiliation: (Political committee) Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee) Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Where contributor works: (Individual) Affiliation: (Political committee) Total Contributions: (add both columns) FURES (Itemize 3rd pary expenditures/ reimburs (add both columns) FURES (Itemize 3rd pary expenditures/ son); business address (if firm) Purpose Sab Logan Street; Musechen, W. J. Sagheth Musechen, W. J. Saghe	Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee) Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee) Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Where contributor works: (Individual) Affiliation: (Political committee) Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee) Total Contributions: (add both columns) FURES (Itemize 3rd pary expenditures/ reimbursements) (add both columns) FURES (Itemize 3rd pary expenditures/ reimbursements) Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee) Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee) Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee) Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee) Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee) Full Name: Address: Contributor's job: (Individual) Affiliation: (Political committee) Full Name: Address: Contributor's job: (Individual) Affiliation: (Political committee) Full Name: Address: Contributor's job: (Individual) Affiliation: (Political committee) Full Name: Address: Contributor's job: (Individual) Affiliation: (Political committee) Full Name: Address: Contributor's job: (Individual) Affiliation: (Political committee) Full Name: Address: Contributor's job: (Individual) Affiliation: (Political committee) Full Name: Address: Addre

Brett Ferro 1309 Marshall Greet McNechen, WY 26140

PITTSBURGH PA 180

TO MOV ZOTO FAMOL



WN Secretary of State Building 1, Suite 157-K 1900 Kanowha Boulevard, East Charleston, WN 25305

66044465055